

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Law Office Of Justine Cuccia  
325 Broadway  
New York, NY. 10007

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Justine Cuccia*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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## 1. Article Addressed to:

Law Offices of Justin Cuccia

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Justin Cuccia*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

*Kimberly Chong*

*1-6-03*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## SENDER: COMPLETE THIS SECTION

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## 1. Article Addressed to:

Pamela J. Day  
80-100 Tryon Place  
Jamaica, NY. 11432

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Pamela J. Day*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## 3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. 7001 1740 0001 2179 8552

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1035

**FILED**  
HARRISBURG, PA

JAN 20 2003

MARY E. D'ANDREA, CLERK  
Per *[Signature]*  
Deputy Clerk

1-00-CV-1901

100  
1/29/03